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DISCLOSURE

APPLICANT

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Substitute for form 1449B/PTO  <div style="text-align: center;">  </div> <h2 style="text-align: center; margin: 10px 0;">INFORMATION DISCLOSURE STATEMENT BY APPLICANT</h2> <p style="text-align: center; margin-top: 20px;"><i>(use as many sheets as necessary)</i></p>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center; padding: 5px;"><i>Complete if Known</i></th> </tr> <tr> <td style="width: 35%; padding: 5px;">Application Number</td> <td style="padding: 5px;">09/592,310</td> </tr> <tr> <td style="padding: 5px;">Filing Date</td> <td style="padding: 5px;">June 13, 2000</td> </tr> <tr> <td style="padding: 5px;">First Named Inventor</td> <td style="padding: 5px;">Upendra CHAUDHARI e</td> </tr> <tr> <td style="padding: 5px;">Group Art Unit</td> <td style="padding: 5px;">Unassigned</td> </tr> <tr> <td style="padding: 5px;">Examiner Name</td> <td style="padding: 5px;">Unassigned</td> </tr> <tr> <td style="padding: 5px;">Attorney Docket Number</td> <td style="padding: 5px;">YOR920000167U!</td> </tr> </table>		<i>Complete if Known</i>		Application Number	09/592,310	Filing Date	June 13, 2000	First Named Inventor	Upendra CHAUDHARI e	Group Art Unit	Unassigned	Examiner Name	Unassigned	Attorney Docket Number	YOR920000167U!
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Examiner Signature	<i>Alt LFL</i>	Date Considered	<i>31.9.04</i>
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<sup>1</sup> Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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